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UTILITY PATENT APPLICATION TRANSMITTAL

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Attorney Docket No.		03752/09148CON5			
	nventor	Robert O. Huff			
Title	Non-Impact	Keyless Chuck			
Expres	ss Mail Label N	o. EL87619609 ÜUS			

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Assistant Commissioner for Patents **APPLICATION ELEMENTS** ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or (Submit an original and a duplicate for fee processing) Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Specification [Total Pages (preferred arrangement set forth below) Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, i i. 🔲 or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS - Detailed Description 9. Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of - Abstract of the Disclosure 10. (when there is an assignee) Attorney English Translation Document (if applicable) 11. Drawing(s) (35 U.S.C. 113) [Total Sheets Copies of IDS Information Disclosure 12. 5. Oath or Declaration [Total Pages Citations Statement (IDS)/PTO-1449 13. **Preliminary Amendment** Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d)) Return Receipt Postcard (MPEP 503) 14. X (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** 15. Signed statement attached deleting inventor(s) Request and Certification under 35 U.S.C. 122 named in the prior application, see 37 CFR 16. 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 17. 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: X. Continuation 09,570,427 Continuation-in-part (CIP) of prior application No.: Howe11 Examiner D. Prior application information: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below Name Lloyd G. Farr Nelson Mullins Riley & Scarborough, LLP P.O. Box 11070 <u>Address</u> SC City Columbia State Zip Code 29211 (404)817-60<mark>8</mark>1 404)817-6165 Country US Telephone Fax Name (Print/Type) Lloyd G. Farr Registration No. (Attorney/Agent) 38,446 c Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application. Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

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Complete If Known			
Application Number	Unknown		
Filing Date Filed Herewith			
First Named Inventor	Robert O. Huff		
Examiner Name	Unknown		
Group Art Unit	Unknown		
Attorney Docket No.	03752/09148C0N5		

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:	3. ADDITIONAL FEES				
Deposit	Large Small				
Account S0-1196	Entity Entity Fee	Fee Paid			
Deposit	Code (\$) Code (\$)	ree raiu			
Account Nelson Mullins LLP	105 130 205 65 Surcharge - late filing fee or oath				
Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	127 50 227 25 Surcharge - late provisional filing fee or cover sheet				
Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. XX Payment Enclosed: XX Check	112 920° 112 920° Requesting publication of SIR prior to Examiner action				
Check Credit card Money Other	113 1,840° 113 1,840° Requesting publication of SIR after				
FEE CALCULATION	Examiner action				
1. BASIC FILING FEE	115 110 215 55 Extension for reply within first month				
Large Entity Small Entity	116 390 216 195 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 890 217 445 Extension for reply within third month				
101 710 201 355 Utility filling fee 710.	118 1,390 218 695 Extension for reply within fourth month				
106 320 206 160 Design filing fee	128 1,890 228 945 Extension for reply within fifth month				
107 490 207 245 Plant filing fee	119 310 219 155 Notice of Appeal				
108 710 208 355 Reissue filing fee	120 310 220 155 Filing a brief in support of an appeal				
114 150 214 75 Provisional filing fee	121 270 221 135 Request for oral hearing				
SUDTOTAL (4) (5) 710 00	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) 710.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES Fee from	141 1,240 241 620 Petition to revive - unintentional				
Extra Claims below Fee Paid	142 1,240 242 620 Utility issue fee (or reissue)				
Total Claims	143 440 243 220 Design issue fee				
Claims	144 600 244 300 Plant issue fee				
Multiple Dependent =	122 130 122 130 Petitions to the Commissioner				
Lana Fatte a	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per	1			
103 18 203 9 Claims in excess of 20	property (times number of properties)				
102 80 202 40 Independent claims in excess of 3 104 270 204 135 Multiple dependent claim, if not paid	146 710 246 355 Filing a submission after final rejection (37 CFR § 1.129(a))				
109 80 209 40 ** Reissue independent claims over original patent	149 710 249 355 For each additional invention to be examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 710 279 355 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 0	Other fee (specify)				
.,	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)	0			
*for number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Lloyd G. Farr	Registration No. (Attorney/Agent)	38,446	Telephone	(404) 817-6165
Signature	Ale s. 2			Date	5-12-01

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Box - New Patent Application Assistant Commissioner for Patents Washington, DC 20231

RE:

U.S. Patent Application of Robert O. Huff, et al.

For: Non-Impact Keyless Chuck Our Ref: 03752/09148CON5

Dear Sir:

The following are being transmitted herewith:

- 1. Transmittal letter with Express Mailing Certificate (original plus 1 copy (2 sheets))
- 2. Fee transmittal sheet (1 sheet)
- 3. Utility Patent Application cover sheet (1 sheet)
- 4. Patent Application (16 sheets)
- 5. Drawings (5 sheets)
- 6. Combined Declaration and Power of Attorney (3 sheets)
- 7. Power of Attorney (2 sheets)
- 8. Check in the amount of \$710.00
- 9. Return Postcard

Please charge any deficiency or credit any overpayment required by this action to our deposit account no. 50-1196, for which purpose an extra copy of this transmittal letter is attached.

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Date of Deposit September 12, 2001

Jennifer Falcone

Typed name of person mailing paper or fee

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